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SERIAL NUMBER 10/840,140	FILING DATE 05/06/2004 RULE	CLASS 340	GROUP ART UNIT 2636	ATTORNEY DOCKET NO. CECE 3.0-001
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APPLICANTS

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** CONTINUING DATA ***** None, R

** FOREIGN APPLICATIONS ***** None, R

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 07/10/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY NJ	SHEETS DRAWING 10	TOTAL CLAIMS 41	INDEPENDENT CLAIMS 3
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ADDRESS
 Ezra Sutton
 Plaza 9
 900 Route 9
 Woodbridge , NJ
 07095

TITLE
 Sleep prevention device while driving

FILING FEE RECEIVED 574	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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